

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040044	GLOBAL PARTNERSLP,ALLIANCEENERGYGASOLINE			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
170 TAFTVILLE- OCCUM ROAD				1			
Towns Served: NORWICH							

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Water System Facility: **WELL (WSF ID: 21814)**

E. Coli (3014)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
21814	WELL	2	WELL	A				
54234	UV TREATMENT							
54236	BLADDER STORAGE TANK							

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1040044	GLOBAL PARTNERSLP,ALLIANCEENERGYGASOLINE			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
170 TAFTVILLE- OCCUM ROAD					1			

Towns Served: NORWICH

Contact Information

Name				Organization		Job Title			
Mr. Eric Harvey				Global Partners, Lp		Environmntl Proj Mgr			
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
15 Ne Industrial Road						Branford		CT	06405
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
		203-488-3065	845-238-7354		eharvey@globalp.com				

Contact Role(s): **Administrative Contact**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1040054	CHURCH OF JESUS CHRIST OF LATTER DAY SAI			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
597 SCOTLAND ROAD					1			

Towns Served: NORWICH

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	2/15/2019	3/12/2019
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	5/16/2019	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
21815	WELL	2	WELL	A				

Contact Information

Name				Organization		Job Title		
Mr. Charles Volpetti				Hingham Ma Fm Group		Facility Manager		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
76 Main Street			P.O. Box 570			Foxboro	MA	02035
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
508-698-7970		508-698-7972		508-243-1986	volpettic@ldschurch.org			

Contact Role(s): **Administrative Contact, Legal Contact**

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040054	CHURCH OF JESUS CHRIST OF LATTER DAY SAI			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
597 SCOTLAND ROAD				1			

Towns Served: NORWICH

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1040064	NORWICH AESTHETIC DENTISTRY			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
164 OTROBANDO AVENUE					1			
Towns Served: NORWICH								

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate (1040)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Nitrite (1041)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	2/15/2019	2/12/2019
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	5/16/2019	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
21816	WELL	2	WELL	A				
54704	BLADDER TANK							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040064	NORWICH AESTHETIC DENTISTRY			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
164 OTROBANDO AVENUE				1			
Towns Served: NORWICH							

Contact Information

Name				Organization			Job Title		
Dr. Edward C. Yates				Norwich Aesthetic Dentsitry			Dentist-Owner		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
164 Otrobando Avenue						Norwich		CT	06360
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-889-6445			860-889-5572			860-961-6221	yatesrecords@gmail.com		
Contact Role(s): Administrative Contact, Legal Contact, Owner									

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040084	NORWICH WORSHIP CENTER			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
165 LAWLER LANE				1			
Towns Served: NORWICH							

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
RESPOND TO SANITARY SURVEY	1/16/2019	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/16/2019	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
21818	WELL	2	WELL	A				

Contact Information

Name				Organization				Job Title		
Mr. Michael Maixner										
Mailing Address Line One			Mailing Address Line Two				City		State	Zip Code
165 Lawler Lane							Norwich		CT	06360
Business Phone		Extension	Fax		Mobile Phone		Emergency Phone	Email Address		
Contact Role(s):		Legal Contact								

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1040084	NORWICH WORSHIP CENTER	NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
165 LAWLER LANE				1	
Towns Served: NORWICH					
Name		Organization		Job Title	
Mr. Jefferey R. Sharp		Norwich Worship Center		Senior Pastor/Pre.	
Mailing Address Line One		Mailing Address Line Two		City	State
165 Lawler Lane				Norwich	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-822-9522	11	860-822-6678		860-334-0651	pastor@norwichworshipcenter.org
Contact Role(s): Administrative Contact					

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040104	7-ELEVEN #32524			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
152 TAFTVILLE-OCCUM ROAD				1			
Towns Served: NORWICH							

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	4/27/2019	
CORRECTIVE ACTION/CORRECTIVE ACTION PLAN	4/27/2019	

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform MCL Violation	1/1/10 - 3/31/10	2	5/8/2010	4/2/2019	5/18/2010	4/2/2019
Total Coliform M&R Violation	10/1/12 - 12/31/12	2	5/11/2013	4/2/2019	5/21/2013	4/2/2019

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
21820	WELL	2	WELL	A				

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1040104	7-ELEVEN #32524			NC	25	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
152 TAFTVILLE-OCCUM ROAD					1			

Towns Served: NORWICH

Contact Information

Name				Organization			Job Title		
Mr. Dave Goodman				Olde Northeast Realty Lp			Administrator		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
22 Christy's Drive			Suite 4			Brockton		MA	02301
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
508-427-6111		508-427-4333							

Contact Role(s): **Administrative Contact, Legal Contact, Owner**

Name				Organization			Job Title		
Christy's Realty Limited Partnership									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
P. O. Box 711			C/O Southland Cofp-Tax Dept Loc 125			Dallas		TX	75221
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				

Contact Role(s): **Owner**

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1040134	THE NORWICH FISH & GAME ASSOC., INC.			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
44 BROWNING ROAD				1			
Towns Served: NORWICH							

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT - WELL #2 (WSF ID: 00701)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT - WELL 2 (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
Total Coliform MCL Violation	4/1/11 - 6/30/11	2	8/10/2011		8/20/2011	
Total Coliform MCL Violation	7/1/11 - 7/31/11	2	9/15/2011		9/25/2011	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00701	ENTRY POINT - WELL #2	3	ENTRY POINT - WELL 2	A				
54488	WELL #2	2	WELL #2	A				
54882	BLADDER TANK							

Contact Information

Name		Organization			Job Title		
Norwich Fish & Game Association, Inc.							
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
44 Browning Road					Norwich	CT	06360
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
CT1040134	THE NORWICH FISH & GAME ASSOC., INC.	NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
44 BROWNING ROAD			1		
Towns Served: NORWICH					
860-887-3174					
Contact Role(s): Owner					
Name		Organization		Job Title	
Mr. Jan M. Schneider		Norwich Fish & Game		2008 House Chairman	
Mailing Address Line One		Mailing Address Line Two		City	State
44 Browning Road				Norwich	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-433-7285				860-887-3174	jschneid@EBMAIL.GDEB.COM
Contact Role(s): Administrative Contact					
Name		Organization		Job Title	
Ms. Amy Sipuleski					
Mailing Address Line One		Mailing Address Line Two		City	State
290 High Street				Baltic	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
			860-608-5869		
Contact Role(s): Legal Contact					
Name		Organization		Job Title	
Mr. Brent Al		Norwich Fish & Game		House Chair	
Mailing Address Line One		Mailing Address Line Two		City	State
44 Browning Road				Norwich	CT
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-303-0861					ogees228365@yahoo.co m
Contact Role(s): Legal Contact, Owner					

Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

<http://www.ct.gov/dph/publicdrinkingwater>

End of schedule

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1049024	MOHEGAN PARK - GROUP PAVILION			NC	25	L	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
PARK CENTER RD / MOHEGAN PARK RD			Connections				1	

Towns Served: NORWICH

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18	4/1-12/31	Complete
	1/1/19 - 12/31/19	4/1-12/31	
	1/1/20 - 12/31/20	4/1-12/31	

Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
50021	WELL 1	2	WELL 1	A				
57133	PRESSURE TANK							

Contact Information

Name				Organization			Job Title		
Ms. Peter Nystrom				City of Norwich			Mayor		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
Norwich City Hall			100 Broadway			Norwich		CT	06360
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-823-3743			860-885-2914				pnystrom@cityofnorwich.org		
Contact Role(s):		Administrative Contact, Legal Contact							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1049024	MOHEGAN PARK - GROUP PAVILION			NC	25	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
PARK CENTER RD / MOHEGAN PARK RD						1	
Towns Served: NORWICH							

Please note the following:

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End of schedule

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT1049034	MOHEGAN PARK - DOG POUND			NC	25	L	GW	
Local Address (where applicable)			Service	Residential	Commercial	Industrial	Combined	Agricultural
PARK CENTER RD / MOHEGAN PARK RD			Connections				1	
Towns Served: NORWICH								

Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100) **1 routine (RT) per quarter**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS) **1 routine (RT) per quarter**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX) **1 routine (RT) per year**

<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18	4/1-12/31	Complete
	1/1/19 - 12/31/19	4/1-12/31	
	1/1/20 - 12/31/20	4/1-12/31	

Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
50031	WELL 1	2	WELL 1	A				
57151	PRESSURE TANK							

Contact Information

Name				Organization			Job Title		
Ms. Peter Nystrom				City of Norwich			Mayor		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
Norwich City Hall			100 Broadway			Norwich		CT	06360
Business Phone		Extension	Fax		Mobile Phone	Emergency Phone	Email Address		
860-823-3743			860-885-2914				pnystrom@cityofnorwich.org		
Contact Role(s):		Administrative Contact, Legal Contact							

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Connecticut Department of Public Health Drinking Water Section

Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT1049034	MOHEGAN PARK - DOG POUND			NC	25	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
PARK CENTER RD / MOHEGAN PARK RD						1	
Towns Served: NORWICH							

Please note the following:

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